## Wisconsin Child Care Regulatory System

## WASHINGTON County CERTIFIED Child Care Directory as of 2/4/17

| Facility Name   | CANDACE C. HELLAND      | Contact                | HELLAND, CANDACE  | Full Time            | -                                  |
|-----------------|-------------------------|------------------------|-------------------|----------------------|------------------------------------|
| Address         | 791 Valley Forge Dr     | Phone #                | 262-247-6363      | CERTIFIED Capacit    | y3                                 |
|                 | Slinger, Wi 53086-9345  | CERTIFIED Date         | 06/22/2011        | From Age             | 6 Year(s), 0 Month(s), 0 Week(s)   |
| Category        | PROVISIONAL CERTIFIED   | Months                 | Jan-Dec           | To Age               | 13 Year(s), 0 Month(s), 0 Week(s)  |
| Facility ID     | -                       | Hours                  | 08:00 AM-08:00 PM | Star Level           | 2 Stars                            |
| Provider Number | 8000586868              | <b>Location Number</b> | 001               |                      |                                    |
| Facility Name   | COLLEEN WIMBERLY        | Contact                | WIMBERLY, COLLEEN | Full Time            | Υ                                  |
| Address         |                         |                        | 262-527-1336      | CERTIFIED Capacity 3 |                                    |
|                 | Hartford, Wi 53027-2785 | CERTIFIED Date         | 09/16/2015        | From Age             | 0 Year(s), 0 Month(s), 0 Week(s)   |
| Category        | PROVISIONAL CERTIFIED   | Months                 | Jan-Dec           | To Age               | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID     | -                       | Hours                  | 07:00 AM-04:30 PM | Star Level           | 2 Stars                            |
| Provider Number | 0000588680              | <b>Location Number</b> | 001               |                      |                                    |

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| Facility Name   | ALEAH BREIDENBACH                              | Contact                | BREIDENBACH, ALEAH M  | Full Time            | Υ                                 |
|-----------------|--|------------------------|-----------------------|----------------------|-----------------------------------|
| Address         | W201n1651 Hemlock St<br>Jackson, Wi 53037-9244 | Phone #                | 262-408-0939          | CERTIFIED Capacity 3 |                                   |
|                 |  | CERTIFIED Date         | 03/06/2015            | From Age             | 0 Year(s), 0 Month(s), 6 Week(s)  |
| Category        | REGULAR CERTIFIED                              | Months                 | Jan-Dec               | To Age               | 4 Year(s), 0 Month(s), 0 Week(s)  |
| Facility ID     | -  | Hours                  | 07:00 AM-04:30 PM     | Star Level           | Unknown                           |
| Provider Number | 6000588476                                     | Location Number        | 001                   |                      |                                   |
| Facility Name   | HOLLY SCANNELL                                 | Contact                | SCANNELL, HOLLY       | Full Time            | Υ                                 |
| Address         | 1056 Chestnut St<br>West Bend, Wi 53095-3127   | Phone #                | 262-689-7912          | CERTIFIED Capacity 3 |                                   |
|                 |  | CERTIFIED Date         | 06/08/2010            | From Age             | 0 Year(s), 0 Month(s), 6 Week(s)  |
| Category        | REGULAR CERTIFIED                              | Months                 | Jan-Dec               | To Age               | 12 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID     | -  | Hours                  | 06:00 AM-07:00 PM     | Star Level           | 2 Stars                           |
| Provider Number | 2000585672                                     | Location Number        | 001                   |                      |                                   |
| Facility Name   | JACQUELINE BOTIC                               | Contact                | BOTIC, JACQUELINE     | Full Time            | Υ                                 |
| Address         | 1707 Larkspur Ln<br>West Bend, Wi 53090-1039   | Phone #                | 262-366-4549          | CERTIFIED Capacity 3 |                                   |
|                 |  | CERTIFIED Date         | 06/24/2013            | From Age             | 0 Year(s), 0 Month(s), 6 Week(s)  |
| Category        | REGULAR CERTIFIED                              | Months                 | Jan-Dec               | To Age               | 12 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID     | -  | Hours                  | 06:00 AM-05:30 PM     | Star Level           | Unknown                           |
| Provider Number | 9000587799                                     | <b>Location Number</b> | 001                   |                      |                                   |
| Facility Name   | PENELOPE-ANN BAIER                             | Contact                | BAIER, PENELOPE-ANN B | Full Time            | Υ                                 |
| Address         | N108 W17504 Lilac La<br>Germantown, Wi 53022   | Phone #                | 262-251-7533          | CERTIFIED Capacity 3 |                                   |
|                 |  | CERTIFIED Date         | 08/03/2003            | From Age             | 0 Year(s), 0 Month(s), 6 Week(s)  |
| Category        | REGULAR CERTIFIED                              | Months                 | Jan-Dec               | To Age               | 8 Year(s), 0 Month(s), 0 Week(s)  |
| Facility ID     | -  | Hours                  | 06:30 AM-05:30 PM     | Star Level           | Unknown                           |
| Provider Number | 4000575614                                     | <b>Location Number</b> | 001                   |                      |                                   |
| Facility Name   | PRECIOUS MOMENTS IN-HOME DAY CARE              | Contact                | PAWLOWSKI, JAYCEL     | Full Time            | Υ                                 |
| Address         | 1517 Vogt Dr<br>West Bend, Wi 53095-4994       | Phone #                | 262-334-4863          | CERTIFIED Capacity 3 |                                   |
|                 |  | CERTIFIED Date         | 10/25/2016            | From Age             | 0 Year(s), 0 Month(s), 6 Week(s)  |
| Category        | REGULAR CERTIFIED                              | Months                 | Jan-Dec               | To Age               | 12 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID     | -  | Hours                  | 06:00 AM-10:00 PM     | Star Level           | Unknown                           |
| Provider Number | 9000588999                                     | Location Number        | 001                   |                      |                                   |